

STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

For Official Use

IN THE MATTER OF:

**Order Confirming
Voluntary Admission**

Name of Subject

Case No. _____

Date of Birth

Based upon an allegations of the Petition for Review and any accompanying documents,

The Court finds there is a prima facie showing:

- ☐ that the minor is in need of psychiatric services, or services for developmental disabilities, alcoholism, or drug abuse;
- ☐ that the facility the minor has been admitted to offers inpatient therapy or treatment that is appropriate to the minor's needs;
- ☐ that the facility is the least restrictive therapy or treatment consistent with the needs of the minor;
- ☐ that the minor is 14 years of age or older and has been admitted to the facility for the primary purpose of treatment for mental illness or developmental disabilities and the admission was made under an application executed by the minor and the minor's parent or guardian.

IT IS ORDERED that the voluntary admission of the minor is approved.

BY THE COURT:

Distribution:

- 1. Original - Court
- 2. Facility
- 3. Other: _____

Circuit Court Judge

Name Printed or Typed

Date